

# THE GERMAN STERILIZATION LAW

## Discussion on Professor Muckermann's Lecture

ON October 30th, at the rooms of the Linnean Society, Professor Hermann Muckermann, until July 1933 Director of the department of eugenics in the Anthropological Institute at Berlin, addressed a Members' Meeting on "The Eugenics Movement in Germany." The President of the Society, Sir Humphry Rolleston, took the Chair.

In the first part of his address, Professor Muckermann dealt with questions of race, defending his thesis that it was necessary to protect the indigenous racial composition from mixture with other races which were alien and perhaps antagonistic. Every nation, he said, had its special character, which depended not only on history and environment, but essentially on heredity. If we wished to retain our own character, we had to preserve our racial composition. This principle involved a deep respect for the cultural abilities of every nation, though our love was primarily directed to our own, as to a mother. This love, he asserted, did not depend on a sense of racial superiority. The practical measures in Germany were concerned with certain enactments governing the contracting of marriage, supervision of immigration, and the control of racial influences upon education and public life.

Turning to problems of human heredity, the lecturer outlined the progress that had been made in research upon the heredity of useful and pathological qualities, especially of a higher psychic kind, and discussed differential fertility in the eugenic sense of the term. The offspring of hereditarily well-endowed families were not sufficiently numerous to replace their parents. The practical steps taken in Germany included eugenic education, schemes for diminishing the number of hereditarily afflicted persons and preserving and increasing the number of those with useful qualities, and sterilization.

Some of the figures relating to the practice of sterilization under the new German Act

were highly instructive. In Baden up till June 15th, 1934,\* there had been 3,025 petitions for sterilization, i.e. on behalf of 1.2 per cent. of the inhabitants of the state. Of these petitions 675 were voluntary and 2,350 were compulsory, that is to say they were sent in by some person other than the candidate for sterilization. A few of the total number of petitions were refused before receiving consideration by the Eugenic Courts—66 out of 3,025; of the remaining 2,959, 1,903 were granted or ordered, and of these 572 (289 males and 283 females) have so far been carried out. More of these 1,903 persons will doubtless be sterilized in due course. Professor Muckermann did not say how many of the 572 sterilizations above referred to were voluntary and how many were compulsory.

In Hamburg, 1,325 petitions had been received, 782 voluntary and 543 compulsory. A few—8 of the total number—had been refused before consideration by the Courts; 761 sterilizations had been ordered; and 364 persons (155 males and 209 females) had been sterilized.

From March 5th to June 21st there had been 244 petitions in Kiel, 131 concerning males and 133 females. All had been granted or ordered and 62 persons had been sterilized to date. In approximately the same period there had been 325 petitions in Berlin, 143 voluntary and 182 compulsory. All of them had been granted or ordered.

It was noteworthy, said Professor Muckermann, that two-thirds of these petitions were on behalf of feeble-minded persons and the remaining one-third were almost exclusively concerned with schizophrenics and epileptics. Extremely few members of the other categories specified in the German Sterilization Act had hitherto been sterilized.

Prof. Muckermann concluded his instructive lecture with the following sentences: "I have

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\* The Act came into force on January 1st, 1934.

tried to give you an objective account of all practical measures referring to national eugenics in Germany and of their scientific foundations. There is no doubt that in this respect great progress has been made in my country. I should be happy if the acceleration given to the eugenic movement in Germany by legislative measures might greatly assist the growth of the eugenic movement and of eugenic ideas in England. In both countries there is no more important idea than to remain as faithful as possible to scientific principles and to the super-natural principles of ethics that involve the respect for the well-founded liberty of conscience. The national honour and welfare depend on this fidelity to truth and conscience. This attitude is in accordance with the views of Sir Francis Galton, the founder of eugenics, whose epitaph ought to find a place beside those of Newton and Darwin in Westminster Abbey."

Major A. G. Church said that when he introduced the Sterilization Bill in the House of Commons in 1931, he was bitterly attacked by many bodies, but more particularly by Catholics and in the Catholic Press. It was therefore of particular significance that Professor Muckermann, himself a devout Catholic, should openly advocate sterilization as a means of dealing with one of the gravest social problems of our time and proclaim as he did the fact that he was the inspiration of the present Sterilization Law in Germany. It behoved us, as Members of the *Eugenics Society*, to give wide publicity to this fact, which he hoped would serve to remove the misconceptions and misapprehensions of large sections of the religious community in this country regarding the effect of the measures which we advocated.

Dr. A. J. Lewis said that for him the chief interest of Professor Muckermann's guarded presentation lay in the references to compulsory sterilization. The earlier part of the paper, which had dealt with the racial question, excelled in under-statement, which was perhaps to be expected in any apologia about such "delicate matters," as Dr. Muckermann had called them; the theories and practice put forward were matters of political feeling; they rested on belief and not on biology, as might be seen from Dr. Muckermann's own writings and those of other German proponents of *Heimrassigkeit*. But for us in England the question of compulsory as against voluntary sterilization

was a more relevant issue. The German law was a compulsory measure. This had social, medical and eugenic consequences. Socially there were evident an indifference about the individual and a readiness to apply force in this most personal matter, which conflicted with civilized ethics; and this indifference was sometimes openly expressed by responsible biologists and administrators in Germany. It was unpleasant to consider that policemen were to be invoked to hale along, and even to hold during the sterilizing operation reluctant subjects, from the age of 14 onwards.

Medically the measure had already been reported by responsible authorities to be prejudicing the relations of patient to family doctor, promoting distrust on the one side and erroneous diagnosis on the other; it was making mental hospitals and the psychiatric clinic places which people shunned and feared. As to these consequences there was the testimony of well-known psychiatrists: it was doubtful whether any amount of propaganda would counteract them or restore that confidence in doctors and their discretion, which was an essential element in treatment. Many persons who had recovered from their mental illness had now to choose between sterilization and lifelong incarceration in hospitals for the insane. Catholics, for example, had only this latter alternative to being sterilized. It was a cruel dilemma for those whose religion or conscience forbade sterilization.

All these dangers and sufferings might be thought, by those who put the State before all, to be worth incurring if eugenic ends were being truly served. But it was doubtful whether compulsory sterilization did this. For one thing the German law expressly forbade voluntary sterilization: however clear it might be that a person was a carrier of transmissible disease, or was unfit to bring up children, he could not be sterilized unless he had manifested one of several named diseases. It ignored in its drastic provisions the possibility that most valuable positive qualities might be present in those who had also one of these specified conditions. However high their endowments

in many directions, the definite occurrence of, say, an attack of mild mania meant compulsory sterilization. In this, as in many other ways, the wholesale and ruthless provisions of the German law, as laid down and already widely enforced, were out of keeping with eugenics in its positive aspect, as well as its negative. The individual case might properly be judged on its merits in the present state of knowledge, but the studies made did not justify sweeping measures of this sort applied to the whole nation willy-nilly. Much further research was needed, as the scientific writings of Professor Rüdin and others showed in less propagandist days. But the new law had already, according to foremost workers in the field, made it difficult to collect trustworthy information from which further knowledge might be drawn as to the heredity of these somewhat heterogeneous groups of diseases, like schizophrenia. If research was impeded or stifled by a law, if people became afraid of consulting doctors and of entering hospitals, if valuable qualities were in part extirpated, if voluntary sterilization was forbidden, if human privileges and fundamental rules of civilized life were ignored, then a law which did such things was scarcely a step in advance.

In concluding his remarks Dr. Lewis reminded the audience that it was not sterilization that was the root of those evils, but *compulsory* sterilization; from voluntary sterilization, he said, no such consequences were to be feared.

Dr. A. Gilpin amplified Dr. Lewis's remarks on some of the dangers of compulsory sterilization by an account of some of the events that took place behind the scenes in connection with applications made under the German law. In a town of 200,000 inhabitants, applications for eugenic sterilization had been made in 4,000 cases and it was interesting to note that of these merely a handful had been notified by general practitioners. When a general practitioner was informed that such and such a patient of his was probably suffering from a disease that came within the categories mentioned in the Act, and was asked for further information

about his patient's medical history, he often replied that he did of course realize the situation in regard to this particular patient and had actually completed an application for his sterilization; but he had omitted to send it to official quarters—an oversight on his part! Or again, he would say that, on the medical history, he could not make a definite diagnosis and so had not considered it timely to apply for sterilization. In many cases an intentional misdiagnosis was made in order to obviate the necessity for making an application.

The general practitioner was often faced with the choice of loyalty to his patient or adherence to the state laws, and for a variety of reasons he was likely to choose the former and as best he could circumvent the latter.

Professor F. C. S. Schiller suggested that too much stress should not be laid on the defects of the German eugenical legislation or on the administrative difficulties to which it gave rise. No doubt it was unwise to force the pace, and probable that compulsory sterilization would prove less workable and effective than a voluntary measure. But these mistakes could be corrected, and should not stand in the way of our recognising the great historic importance of the action of the German Government. The eugenics movement had been started in this country and we had talked about it for some fifty years; but we had never succeeded in getting anything done. Now for the first time a great modern state had committed itself to a far-reaching eugenical programme. If it succeeded, or even seemed to succeed, similar, possibly improved, programmes would have to be adopted in all countries that were not inclined to resign themselves to progressive internal decay. There was one point he was very curious about, and about which he would like the lecturer to give some information. Could he tell them by persuading whom it had been possible to put through this legislation? If it was by convincing one man, or even a few, it seemed to him an important argument in favour of institutions that rendered such action possible, for he had to confess himself very sceptical whether it

could ever be obtained from the vote-catching timidity of the leaders of our present democracy.

Dr. D. I. Frost expressed the view that politics and medicine nowhere linked up more closely than in eugenics, and asked the *Society*, as a scientific body, to accept the implications of this connection and admit that Professor Muckermann's address reflected the revolutionary changes in Germany chiefly from their political facet. The shifting of the eugenic leadership from Berlin to Munich corresponded only to the translation of political leadership from the Reichstag to the Brown House.

Examining the situation in England, the speaker reminded the audience that the certified insane numbered roughly 150,000 persons, and that, in addition, there existed in the country over 350,000 persons who at some time or other had been certified. If a sterilization measure similar to the German one operated here, not only this half-million persons would be affected but large numbers of their collaterals. Enough was known about mental disorder to show that hereditary transmission was not the dominant factor in its etiology. While £10,000,000 was spent on more segregation and only £10,000 on research, it was impossible to say that we had exhausted every avenue of investigation. Even within the category of mental deficiency only 5-10 per cent. of patients had mentally defective parents. Mental defect had increased 100 per cent. in the past twenty years, while the population had grown only by 14 per cent. The effects of social and economic stress had never been worked out; nor had the effects of maternal malnutrition or of attempted abortion—which, he said, was in many cases "an economic incident."

In times of crisis it was particularly important to bear in mind the social factor in mental disorder. In France, 20 per cent. of the inmates of mental hospitals in the larger towns were (according to the speaker) foreign immigrants—chiefly political refugees from Germany. What, he asked, were the effects of political persecution in Germany itself? Mental breakdown under terror con-

ditions and sterilization of the unfit and their progeny were not instruments of race purification but of political extinction. On purely technical grounds we should note with dismay the application of the German Sterilization Law not only to manic-depressive psychoses but also to schizophrenia. Application of the latter term was being widened from the concept of the dementia praecox group to refer to any dissociating process in any psychosis; not to schizophrenia the *disease*, but to schizophrenia the *symptom*, which was part and parcel of the majority of psychoses. So that the carefully numbered and apparently limited list to which the German law applied really included every form of mental breakdown.

The voluntary sterilization advocated in the Brock Report was also suspect. Sterilization, voluntary or compulsory, added no advantage to the individual sufferer and indeed it added one more inferiority to those already heaped upon him by society. Voluntary sterilization was the thin end of the wedge and threatened not only the person of the unfit but the liberty of political malcontents. Sterilization might be advantageous after social changes had eliminated unnecessary conflicts and hardships; but till then he opposed it.

Mrs. Grant Duff said that at the International Hygiene Exhibition in Dresden, three and a half years ago, the following warning was set up in large letters on the walls of the German section: "If you have a disease, don't get married until you are cured. If your illness is incurable and hereditary, don't get married without first being sterilized!" She had inquired at the time if it was legal to get sterilized in Germany, and the answer was "No, not yet, but we have prepared a Bill which we hope will soon become law." This was in June, 1931—nearly two years before the National Socialist Party came into power.

Dr. Kenneth B. Aikman asked the lecturer whether in his opinion, considering that the German people had been inundated with eugenic propaganda and were highly patriotic,

sufficient numbers of volunteers for sterilization would be forthcoming to allow of a useful scientific investigation of the results if (1) their sterilization law had been on a voluntary basis originally or (2) were made voluntary now.

Mrs. C. B. S. Hodson suggested as a possible explanation of the wide variations in the number of cases of sterilization from different areas in Germany the possibility that these might be correlated with differences in the method of administering the new law. Taking an analogy from America she said that States with compulsory laws for the most part showed a negligible number of

operations whereas California, having administered as a voluntary measure a law which read as entirely compulsory, authorizing the operation only on patients who had signed an application for it, had its well-known high record of sterilizations for eugenic purposes. The administrators of the German law, whom she herself had met, had an infectious enthusiasm for the racial value of sterilization and proclaimed as heroes of the Fatherland those who volunteered for the operation or freely consented to it. Where they succeed in carrying public opinion with them the grave difficulties created by a compulsory system would not be likely to arise.



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An International Quarterly for Psychodiagnostics  
and Allied Studies

Editor: ROBERT SAUDEK—London

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